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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)	Attorney Docket Number	PC10534AADO
	First Named Inventor	Michael P. DeNinno, et al
	COMPLETE IF KNOWN	
	Application Number	To Be Assigned
	Filing Date	Herewith
	Group Art Unit	To Be Assigned
	Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOUNDS FOR THE TREATMENT OF ISCHEMIA

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International

Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/156,828	September 30, 1999 (09/30/1999)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.

EXPRESS MAIL NO. E46339483 5825

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PTO/SB/01 (12/97)
Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent

and Trademark Office connected therewith:

☐ Customer Number
or

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Number Bar Code
Label here

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	Lawrence C. Akers	28,587
Allen J. Spiegel	25,749	A. Dean Olson	31,185
Paul H. Ginsburg	28,718	Mervin E. Brokke	32,723
J. Trevor Lumb	28,567	Valerie M. Fedowich	33,688
James T. Jones	30,561	Bryan C. Zielinski	34,462
Gregg C. Benson	30,997	Robert T. Ronau	36,257
Robert F. Sheyka	31,304	B. Timothy Creagan	39,156
Grover F. Fuller Jr.	31,760	Alan L. Koller	37,371
Karen DeBenedictis	32,977	Jolene W. Appleman	35,428
Lorraine B. Ling	35,251	Kristina L. Konstas	37,864
Garth Butterfield	36,997	Seth H. Jacobs	32,140
Carl J. Goddard	39,203	Martha A. Gammill	31,820
Raymond M. Speer	26,810	Gregory P. Raymer	36,647
Jennifer A. Kispert	40,049	E. Victor Donahue	35,492
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Deborah A. Martin	44,222	Roy F. Waldron	42,208
A. David Joran	37,858	Adrian G. Looney	41,406
Elsa Djuardi	45,963	Jeffrey N. Myers	41,213

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

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or Bar Code Label

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname			
Michael P.		DeNinno			
Inventor's Signature	<i>Michael P. DeNinno</i>			Date	8-8-00
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Post Office Address	9 Heritage Drive				
Post Office Address	c/o Pfizer Inc., 235 East 42nd Street				
City	New York	State	NY	Zip	10017
		Country	USA		

☒ Additional inventors are being named on the _ a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
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Inventor's Signature	Date 8/15/00
Residence: City	Noank State CT Country USA Citizenship US
Post Office Address	68 High Street
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City	New York State NY Zip 10017 Country USA
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
Robert W.	Scott
Inventor's Signature	Date 8/18/00
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Post Office Address	c/o Pfizer Inc., 235 East 42nd Street
City	New York State NY Zip 10017 Country USA
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
Inventor's Signature	Date
Residence: City	State Country Citizenship
Post Office Address	
Post Office Address	
City	State Zip Country
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
Inventor's Signature	Date
Residence: City	State Country Citizenship
Post Office Address	
Post Office Address	
City	State Zip Country